PTO/SB/09 (38-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application of Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Calumn 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED		NUMBER EXTRA		RATE	FEE ·]	RATE	FEE
BASIC FEE (37 CFR 1.16(a))			1		1	- KATE		
TOTAL CLAIMS 2/			1	 	OR			
(37 CFR 1.16(c))				X.S:=		OR	X \$	ļ
(37 CFR 1.16(b)) S minus 3 a				X S=	 	OR	X 5	<u> </u>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+3=		OR	+3	
* If the difference in column	TOTAL	L	OR	TOTAL				
CLAIMS AS AMENDED - PART II								
12/12/D. (Column 1) (Column 2) (Column 3)				CMALL	ENTITO	OR		RTHAN
17.0700	CLAIMS	HIGHEST		SMALL	ENTITY		SMALL	ENTITY
₹ R	EMAINING AFTER.	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total AM	ENDMENT: Minus	PAID FOR	=		FEE		<u> </u>	FEE
Z Independent CT CFR 1.16(v)	/ Minus	- 5		X \$=	 	OR	X 8	
Total (pr cpr 1.16(s)) Independent (pr cpr 1.18(s))	حدد ا	<u> </u>		X \$=	<u> </u>	OR	X 5	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))				+5=	<u> </u>	OR	+s =	
) I	•			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
1/20/00/	olumn 1)	(Column 2)	(Column 3)		•			
	ZAIMS MAINING	HIGHEST NUMBER	PRESENT	RATE	ADOI-		RATE	ADD)-
	AFTER ENDMENT	PREVIOUSLY PAID FOR	EXTRA	l mir	TIONAL			TIONAL .
∑ 100a	Minus	- 90	9	X : =		OR	x s =	766
Cor Care (1.16(a)	Minus Minus	- ×		X : -		OR	x : -	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								
				TOTAL ADO'L FEE	-	OR	TOTAL	
						OR	ADD'L FEE	
	kumn 1)	(Cotumn 2)	(Column 3)				· · ·	
O RE	LAIMS MAINING	HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI	ı	RATE	ADDI
Z AMÉ	FTER NOMENT	PAID FOR			TIONAL . FEE			TIONAL FEE
Total OF CFR 1.(4(4))	Minus		•	x s=		OR	X8=	
AME Total Of cfr 1.14(p) Independent (07 cfr 1.18(p)) Total Of cfr 1.18(p) Independent (07 cfr 1.18(p))	Minus	•••		x 8=		OR	x \$=	.]
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	+ 5 -	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".								

If the "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.